Effective on 12/08/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).							
FEE TRANSMITTAL		Appli	cation Number	10/540,743			
For FY 2009		Filing	Date	12/24/2003			
FOF F Y 2009			Vamed Inventor	Duncan J. Stewart			
Applicant claims small entity status. See 37 CFR 1.27			iner Name	Janet L. Epps-Ford			
		Art U	nit	1633			
TOTAL AMOUNT OF PAYMENT (\$) 825.00		Attorr	ney Docket	5426 - 051955			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1,16 and 1,17 Credit any overpayments							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES							
Small Entity Small Entity Small Entity							
Application Type Fee (\$) Fee		Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fees P	<u>aid (\$)</u>	
Utility 330 8	2 540	270	220	110			
Design 220 11	.0 100	50	140	70			
Plant 220 11	.0 330	165	170	85			
Reissue 330 16	55 540	270	650	325			
Provisional 220 11	0 0	0	0	0			
2. EXCESS CLAIM FEES						Small Entity	
Fee (\$)						Fee (\$)	
Each claim over 20 (including Reissues) 52						26	
Each independent claim over 3 (including Reissues) 220						110	
Multiple dependent claims					390	195	
Total Claims - 20 or HP Ex	ktra Claims Fe	ee (\$)	Fee Paid (\$)		Multiple De	ependent Claims	
=	x	=			Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims - 3 or HP Ex	xtra Claims x	<u>'ee (\$)</u> =	Fee Paid (\$)				
HP = highest number of independent claims p							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.							
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u> <u>Extra Sheets</u>	Number o	of each add	<u>litional 50 or fra</u>	ction thereof	Fee (\$)	Fee Paid (\$)	
100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S)						Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Notice of Appeal; Petition for Extension of Time (3 mos.)						270; 555	
SUBMITTED BY							
1/1/1/1/1/1/	- / ,	R	egistration No.	00.455	T-1	10 471 0017	
Signature WWFF (Attorney/Agent) 22,132 Telephone 412-471-8815							
Name (Print/Type) William H. Logsdon Date February 3, 2010							